

Minutes of the Meeting of the Members of the
Disability Support Advisory Committee of the Counties Manukau District Health Board
Held in the Board Room, 19 Lambie Drive, Manukau
Wednesday 4th February 2003 at 1.00 p.m.

Present: Mr Brent Morrissey (Chair), Mr Paul Cressey, Ms Heather Grace, Ms Donna Rauwhero, Mr Lindsay Smith, Ms Airini Tukerangi, Ms Chris Ellis, Mr Tu'uta Pome'e, Ms Nganeko Minhinnick, Ms Karyn Russell, Professor Sir John Scott

In attendance: Ms Jenni Coles, Ms Carol Delaney, Mr Chris Mules, Ms Elisabeth Harding, (Secretary)

Apologies: Ms Donna Hemi, Mr Donald Barker, Mr Bruce Ellery,

Absent: Dr Siro Fuata'i

1. Welcome

The Chair welcomed members of the Committee. In particular, Mr Brent Morrissey welcomed Ms Mrs Nganeko Minhinnick. There were no members of the public or media present.

2. Apologies

Apologies were received from Mr Donald Barker, Mr Bruce Ellery and Ms Donna Hemi.

3. Ratification of previous minutes (11th December 2002)

Resolution:

The minutes of the meeting of DiSAC held on Tuesday 11th December 2002, having been circulated were taken as read and confirmed.

Moved: Mr Lindsay Smith, **Seconded:** Ms Heather Grace, **Carried** unanimously.

4. Procedural issues

There were no deputations. Congratulations were given to Ms Chris Ellis who has qualified as a health auditor.

5. Devolution of services for older people

A paper is expected to go to Cabinet on 19 February 2003 recommending the transfer of services for people over 65 years to the DHBs. It is anticipated that the timeframe will be devolution on 1 July 2003 although it could be deferred to 1 October 2003. The issues for the Government relate to the DHBs ability to manage the national service consistency and implementation of the Health of Older People strategy. The issues for the DHBs relate to the service and financial risks, the poor state of the current information systems and the quality of information held by the Ministry regarding these services. More specific risks relate to travel and workforce issues. The level of human resourcing which could be devolved from the Ministry to manage this service is also a risk. At this stage it is anticipated that the northern region would have only three staff to manage this service.

It is likely that the Ministry will impose a requirement for regional management of these services. This raises issues related to ensuring sufficient resources are applied to the Counties Manukau region and the potential for bureaucratic complexity. Regional management would be done through the Northern District Support Agency (NDSA).

To date there has been little monitoring or audit of the existing agreements by the Ministry, nor is it expected that the Ministry will increase the revenue for these agreements.

Once the decision regarding devolution has been made, this matter will be referred to the Board. Although it is unlikely that the Board will be able to influence the decision regarding devolution, it may be possible to impose certain conditions including the involvement of the Ministry if following devolution historical contract problems are identified.

The Committee endorsed the need for 'due diligence' prior to devolution on the existing types of agreements and services.

The Committee recommended that management ensure that the Ministry, the Minister and the other northern region DHBs were aware of CMDHB's commitment to local devolution (as set out in the resolution from the previous DiSAC meeting.

6. Counties Manukau Health Council report on Needs Assessment and Service Coordination.

Ms Jenni Coles provided an update, including feedback from the meeting with the Health Council, which Ms Coles and Dr Peter Gow attended. Ms Donna Richards, a member of the Health Council, advised that Ms Coles and Dr Gow's presence at the meeting had been excellent.

Mr Paul Cressey updated the Committee regarding the discussion on this matter at the CPHAC meeting and in particular what should be done with the recommendations contained in the report. Ms Coles noted that those relating to Needs Assessment and Service Coordination were being considered by the provider arm and that Dr Gow had agreed to feedback to the Health Council on these issues. It was also noted that in the past, Health Council reports had been instrumental in getting more funding from the Ministry for specific services.

Mr Chris Mules and Mr Paul Cressey will be meeting with Mr Len Brown and Ms Pat Drury from the Health Council to discuss the format of the report and the prioritisation/focusing of the recommendations to enable CMDHB to respond appropriately.

7. Information Project for DSS in the Northern region

Mr Chris Mules explained that the Northern Region Disability Directorate for the Ministry in conjunction with the three Auckland DHB and Northland DHB had requested this report in preparation for devolution and the planning of disability services. The report indicates that the information currently available is not suitable for planning purposes. It is unclear whether any additional information exists but has not been made available by the Ministry. Members were interested in the reference to the comment regarding the level of disability increasing.

Committee members are invited to feedback their responses on the draft report to Ms Carol Delaney by 18th February 2003, when the steering group next meets.

8. Ageing in Place projects

There are three Ministry funded projects in the CMDHB region:

- Development of an integrated model of assessment, coordination and liaison (Pukekohoe);
- Community development project to build networks of older people from Pacific Island backgrounds and disseminate health/disability information
- Marae based day activities. The Ministry is working directly with MAPO on this project.

9. Case management for older people with complex needs

Ms Carol Delaney updated members about the pilot at Auckland DHB regarding the coordination/facilitation of multiple services to older people with complex needs to enable them to remain living at home. This option is also more cost effective because it avoids or postpones Rest Home/Hospital admission.. It is critical that coordinators have a sound clinical background; other skills, for which they will need specific training, include facilitation/working with families/dealing with abuse etc.. Working with the patient and family on their priorities and identified needs would be central to planning, coordination and review. It was suggested that this could be viewed as a new type of health profession for which there could be funding available through academic institutions, and that the title should be "clinical facilitator".

This pilot has similarities with the Eldercare project, run by East Health.

10. Counties Manukau DiSAC work plan for 2003

- Organising community reference group (Eldercare, Disability issues – refer to September minutes for interested participants).
- Disability employment: the Manukau Courier is drafting an article on this issue. The Mental Health Commission has also published a paper on this topic.
- Home care services: workforce issues.
- Relationship with service providers: Age Concern and PHOs to be invited to present at future meetings.
- Hospital services:
- Workforce development: incentives and training, role of volunteers.
- Devolution.
- Integrated continuum of care.
- Frail elderly
- Updates on the New Zealand Disability Strategy and Health of Older Peoples Strategy.

- Draft implementation plan.

It was requested that management invite a representative from the Ministry of Health to present to the Committee on the Ministry's policy on asset testing.

11. Other general business

There was no other business

The next meeting of DiSAC will be the regional meeting on Wednesday 19th March 2003

The meeting closed at 3.00 pm

Signed as a true and correct record on the day of 2003

Chair:

Mr Brent Morrissey

The minutes of the meeting of the Disability Support Advisory Committee of Counties Manukau District Health Board of 4th January 2003 are approved.

Recommendation (moved Mr Lindsay Smith /seconded Prof Sir John Scott)